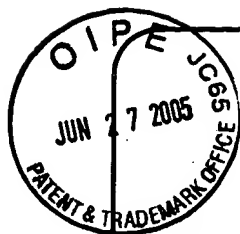


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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	4	Application Number	09/715,764
		Filing Date	November 15, 2000
		First Named Inventor	Heinz-Josef LENZ
		Art Unit	1634
		Examiner Name	Jehanne Souaya Sitton
		Attorney Docket Number	13761-0739

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Power of Attorney by Assignee; Statement Claiming Small Entity Status; Change of Correspondence Address; postcard receipt
<div style="border: 1px solid black; padding: 5px;"> <b>Remarks</b>    </div>		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Bingham McCutchen LLP		
Signature			
Printed Name	Antoinette F. Konski		
Date	June 23, 2005	Reg. No.	34,202

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**POWER OF ATTORNEY  
By Assignee**

University of Southern California, assignee(s) of the application for United States Letters Patent for an improvement in

**GENOMIC POLYMORPHISM FOR PREDICTING THERAPEUTIC RESPONSE**

**Heinz-Josef LENZ, Sheeja Thankappan PULLARKAT and Yi Ping XIONG**

the specification of which:

- ☐ is filed herewith, OR  
☒ was filed on November 15, 2000, having U.S. Patent Application Serial No. 09/715,764.

does hereby appoint as my attorneys and/or agents, with full power of substitution and revocation, to prosecute this application and transact all business in the United States Patent and Trademark Office, and in countries other than the United States, and to do all things necessary or appropriate therefor before any competent International Authorities in connection with any international patent application(s) corresponding to the above-identified application, all of the registered practitioners identified by:

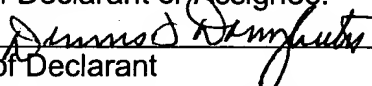
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Please direct all inquiries to **Antoinette F. Konski**, at the above Customer Number.

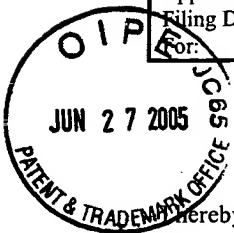
I, the undersigned, declare that I have reviewed copies of the documentary evidence establishing chain of title to the patent application identified above from the inventor(s) to the assignee(s), which:

- ☐ is filed for recordation herewith; or  
☒ was recorded on April 9, 2001, at Reel 011704, Frame 0952; or  
☐ has been sent for recordation under separate cover, copy attached herewith.

To the best of the undersigned's knowledge and belief, title is in the assignee(s) identified above. Furthermore, the undersigned is empowered to sign this document on behalf of the assignee(s).

Full Name of Assignee: University of Southern California	
Post Office Address: 3716 South Hope Street, Suite 313, Los Angeles, CA 90007-4344	
Signature of Declarant or Assignee: 	Date: 5-5-05
Full Name of Declarant	
If Other Than Assignee: Dennis F. Dougherty	
Title of Declarant: Senior Vice President-Admin.	
Address of Declarant: 3716 South Hope Street, Suite 313, Los Angeles, CA 90007-4344	

Applicant **Heinz-Josef LENZ et al.** Attorney Docket No.: **13761-0739**  
Application No.: **09/715,764**  
Filing Date: **November 15, 2000**  
For: **GENOMIC POLYMORPHISM FOR PREDICTING THERAPEUTIC RESPONSE**



**STATEMENT CLAIMING SMALL ENTITY STATUS  
(37 C.F.R. § 1.27(a)(3)(ii)(A)) – NONPROFIT ORGANIZATION**

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

Name of Nonprofit Organization: **UNIVERSITY OF SOUTHERN CALIFORNIA**

Address: of Nonprofit Organization: **3716 South Hope Street, Suite 313, Los Angeles, CA 90007-4344**

Type of Nonprofit Organization:

- ☒ University or other institution of higher learning  
☐ Tax exempt under Internal Revenue Service Code  
☐ Nonprofit scientific or educational under Statute of State of the United States of America  
(Name of State: \_\_\_\_\_)  
(Citation of Statute: \_\_\_\_\_)  
☐ Would qualify as tax exempt under Internal Revenue Service Code  
(26 U.S.C 501(a) and 501(c)(3) if located in the United States of America  
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United States of America if located in the United States  
(Name of State: \_\_\_\_\_)  
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I hereby state that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 C.F.R. 1.27(a)(3) for purposes of paying reduced fees to the United States Patent and Trademark Office regarding the invention described in:

- ☐ the specification filed herewith with title as listed above.  
☒ the application identified above.  
☐ the patent identified above.

I hereby state that rights under contract or law have been conveyed to and remain with the nonprofit organization regarding the above-identified invention. If the rights held by the nonprofit organization are not exclusive, each individual, concern, or organization having rights in the invention must file separate statements as to their status as small entities and that no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 C.F.R. 1.27(a)(1) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 C.F.R. 1.27(a)(2) or a nonprofit organization under 37 C.F.R. 1.27(a)(3).

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate (37 C.F.R. § 1.27(g)(1)).

Name of person signing: **Dennis F. Dougherty**

Title in organization of person signing **Senior Vice President-Admin**

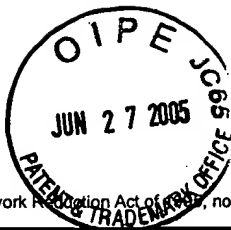
Address of person signing: **3716 South Hope Street, Suite 313, Los Angeles, CA 90007-4344**

Signature: \_\_\_\_\_

*Dennis F. Dougherty*

Date \_\_\_\_\_

*5-5-05*



PTO/SB/122 (09-04)

Approved for use through 07/31/2006. OMB 0651-0035

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Application Number	09/715,764
Filing Date	November 15, 2000
First Named Inventor	Heinz-Josef LENZ
Art Unit	1634
Examiner Name	Jehanne Sitton
Attorney Docket Number	13761-0739

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- ☐ Assignee of record of the entire interest.  
Certificate under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
- ☒ Attorney or agent of record. Registration Number 34,202.
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_.

Signature

Typed or Printed  
NameAntoinette F. Konski  
Bingham McCutchen LLP

Date

June 23, 2005

Telephone

650-849-4950

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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